District of Idaho  Name of Debtor:  COMMINITY HOME HEALTH INC  Seas Number:  98-02141  Aug 28 1998:  MARCO FOR DISTRICT OF IDAHC  Aug 28 1998:  MARCO Claim form and all supporting documents must be filled in DUPLICATE on Chapter 12 and 13 cases  Trustes:  Note of Celaim form and all supporting documents must be filled in DUPLICATE on Chapter 12 and 13 cases  MARCO 13 1 This fore smould pot be seed as an assessment of the defending to the control of the claim form and all supporting documents must be filled in DUPLICATE on Chapter 12 and 13 cases  MARCO 28 1998:  MARCO 28 1998:  MARCO 15 1 This fore smould pot be seed as an assessment of the defending to 15 control of the more of Creditor (The person or other smitter) by whoch is defended in 10 LPC 15 the defended to 15 control of the more of Creditor (The person or other smitter) by which is desirable special and the first hereigned and the 15 control of the second or special groy or claim. Attach copy of statement giving particulars.  Solve 2, 27 2 2 2 3 15 C.  Check box if you are aware that anyone close has filled a proof of claim in the same of Creditor.  Check box if you have aware that anyone close has filled a proof of claim in the same of Creditor.  Check box if you have aware that anyone close has filled a proof of claim in the same of the more of the claim in bankrophery or in this same.  Check box if the address differs from the address on the envelope.  Check box if the address differs from the address on the envelope.  Check box if you have a service exerved any notices from the address on the envelope.  The control of the same and comparison.  Your social Security Number.  Your Social Security	R) 1810 (3/98)		
CARE Number:  CARE Number:  CARE Number:  CARE Number:  CARE Number:  DISTRICT OF IDAH  AUG 28 1938:	District of Idaho		PROOF OF CLAIM THIS SPACE IF FOR COURT USE ONLY
Trustee: Proof of claim form and all supporting documents must be filed in DUPLICATE on Chapter 12 and 13 cases  M.REC'D	Name of Debtor:	Case Number:	UNITED STATES COURTS DISTRICT OF IDAHO
Name of Creditor (The person or other minity to whom the debtor owes money or property):  \$12.1 \$ \times ALL FlashEd RL.  \$12.5 \$ \times ALL FlashEd RL.  \$13.5 \times ALL FlashEd RL.  \$1.5 \times ALL FlashEd RL.  \$2.5 \times ALL FlashEd RL.  \$3.5 \times ALL FlashEd RL.  \$4.5 \times ALL FlashEd RL.  \$5.5 \times All Flas	Chanter Trustee:		
relating to your claim. Attach copy of statement giving particulars.    STEVE J BAGGERLY   Check box if you have never received any notices from the bankruptcy of in this case.   Check box if the address differs from the address on the envelope.	NOTE: This form should not be used to make a claim for an administra of the case. A "request" for payment of an administrative expense may be i	tive expense arising after the commencement filet pursuant to U.S.C. \$503	LODGEDFILED_
Account or other number by which identifies debtor:    Check here if this claim:   Check bas if or Claim   Goods Sold   Services Performed   Money Loaned   Personal Injury/Wrongful Death   Tau   Replaces and Compensation for services performed from   Your Social Security Number:   Str 72 - 0.795   (date) to   (date)	STEVE J BAGGERLY	relating to your claim. Attach copy of Check box if you have never received in this case.	of statement giving particulars.  any notices from the bankruptcy court
Basis for Claim   Goods Sold   Services Performed   Merice benefits as defined in 11 U.S.C. \$1114(a)   Other (flease describe):   Suages, Salaries and compensation:   Your Social Security Number:   Suages, Salaries and compensation for services performed from   Your Social Security Number:   Suages, Salaries and compensation for services performed from   Quality   Control of the Succession of the Suages, Salaries and compensation for services performed from   Quality	Account or other number by which identifies debtor:	kedda yangdakin kiloda kidi nikilinga inda afeddinadadinaday, ningyendenini yan likili kedeninan bir	□ Amends a previously filed claim
SECURED CLAIM   Check box if your claim is secured by collateral (including a right of setoff)   Check box if you relaim is secured by collateral:   Check box if you have an unsecured priority claim   Check box if you have an unsecured priority claim   Check box if you have an unsecured priority claim   Amount entitled to priority \$   Amount of arrearage and other charges at time the case was filed included in secured claim, if any:   SECIFY PRIORITY OF CLAIM:   Wages, Salaries, or commissions (up to \$4000)* earned within 90 days before file of the bankruptcy petition or cessation or the debtor's business, whichever is earl (11 U.S.C. § 507 (a)(3))   Contributions to an employee benefit plan (11 U.S.C. § 507 (a)(4))   Up to \$1,800* of deposits toward purchase, lease, or rental of property or service personal, family or household use (11 U.S.C. § 507 (a)(6))   Alimony, maintenance, or support owed to a spouse, former spouse or child (11 U.S.C. § 507 (a)(7))   Taxes or penalties owed to governmental units (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Alimony, maintenance, or support owed to a spouse, former spouse or child (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8)   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8)   Other - Specify applic	1. Basis for Claim ☐ Goods Sold Services Performed ☐ Retiree benefits as defined in 11 U.S.C. §1114(a) ☐ Other (please de Wages, Salaries and compensation: Your Social Security Num ☐ Unpaid Compensation for services performed from	escribe): nber: 5/8-92-0795 (date) to (date	alika Justa merendakan duara kebidi. Nasa Triba kemi
SECURED CLAIM   Check box if your claim is secured by collateral (including a right of setoff)   Check box if you relaim is secured by collateral:   Check box if you have an unsecured priority claim   Check box if you have an unsecured priority claim   Check box if you have an unsecured priority claim   Amount entitled to priority \$   Amount of arrearage and other charges at time the case was filed included in secured claim, if any:   SECIFY PRIORITY OF CLAIM:   Wages, Salaries, or commissions (up to \$4000)* earned within 90 days before file of the bankruptcy petition or cessation or the debtor's business, whichever is earl (11 U.S.C. § 507 (a)(3))   Contributions to an employee benefit plan (11 U.S.C. § 507 (a)(4))   Up to \$1,800* of deposits toward purchase, lease, or rental of property or service personal, family or household use (11 U.S.C. § 507 (a)(6))   Alimony, maintenance, or support owed to a spouse, former spouse or child (11 U.S.C. § 507 (a)(7))   Taxes or penalties owed to governmental units (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Alimony, maintenance, or support owed to a spouse, former spouse or child (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8))   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8)   Other - Specify applicable paragraph of (11 U.S.C. § 507 (a)(8)   Other - Specify applic	2. Date debt was incurred: June 1. 1998 - June 25,11	3. If court Judgment, date obtained:	
7. Credits: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.  8. Supporting Documents: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of runn accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENT of the documents are not available, please explain. If the documents are voluminous, attach a summary.  9. Date Stamped Copy: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof claim.  DATE  Sign and print the name and title; if any of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any)	4. SECURED CLAIM  Check box if your claim is secured by collateral (including a right of setoff)  Brief Description of Collateral: Real Estate	5. UNSECURED PRIORITY CLAIM  Check box if you have an unsecured priori  Amount entitled to priority \$  SPECIFY PRIORITY OF CLAIM:  Wages, Salaries, or commissions (up to \$4 of the bankruptcy petition or cessation or to (11 U.S.C. § 507 (a)(3))  Contributions to an employee benefit plan  Up to \$1,800* of deposits toward purchas personal, family or household use (11 U.S.C. § 507 (a)(7))  Alimony, maintenance, or support owed to (11 U.S.C. § 507 (a)(7))  Taxes or penalties owed to governmental  Other - Specify applicable paragraph of (1)  *Amounts are subject to adjustment on 4/11, respect to cases commenced on or after the	1000)* earned within 90 days before filing the debtor's business, whichever is earlier.  (11 U.S.C. § 507 (a)(4)) c, lease, or rental of property or services for S.C. § 507 (a)(6)) to a spouse, former spouse or child units (11 U.S.C. § 507 (a)(8)) 1 U.S.C. § 507 (a)()
8/21/26 56 5 20	7. Credits: The amount of all payments on this claim has been credite 8. Supporting Documents: Attach copies of supporting documents, s accounts, contracts, court judgments, mortgages, security agreemen If the documents are not available, please explain. If the document 9. Date Stamped Copy: To receive an acknowledgment of the filing claim.	and deducted for the purpose of making the such as promissory notes, purchase orders, in this, and evidence of perfection of lien. DO N is are voluminous, attach a summary. of your claim, enclose a stamped, self-address	is proof of claim. voices, itemized statements of running OT SEND ORIGINAL DOCUMENTS used envelope and copy of this proof
Penalty for presenting fraudulent claim: Fine up to \$500,000 or imprisonment for up to 5 year, or both. 18 U.S.C.§152 and §3571	DATE Sign and print the name and title, if any of the	e creditor or other person authorized to file this claim (atta	The County beginning a season of B
	Penalty for presenting fraudulent claim: Fine up to \$500,000 or in	nprisonment for up to 5 year, or both. 18 U.S.	S.C.§152 and §3571

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